

Good morning. My name is Marie Lenane and I am a Pricing Analyst for the Purchase of Service Administration at the Executive Office of Health and Human Services (EOHHS). I am here to present testimony on the proposed amendments to the regulation at 101 CMR 204.00: Rates of Payment to Resident Care Facilities. The proposed amendments are effective October 1, 2021.

Massachusetts General Laws Chapter 118E, Section 13D, requires EOHHS to establish rates for resident care facilities, also called rest homes.

The proposed amendments would retain payments for staff surveillance testing and, as of October 1, 2021, would provide a one-time amnesty, allowing resident care facilities ineligible or at risk of losing eligibility for such payments due to accrued instances of noncompliance to start with a clean record and enabling previously ineligible resident care facilities to regain eligibility for prospective payments. The proposed amendments would eliminate COVID-19 supplemental support payments that would be paid to all resident care facilities if certain benchmarks were met with respect to increasing COVID-19 infection rates and high numbers of facilities reporting low staffing. Finally, the proposed amendments would allow resident care facilities to bill separately at the standard rate established at 101 CMR 446.00 (\$45.87) for COVID-19 vaccine administration.

The fiscal impact of these amendments is an annualized amount of approximately \$1M related to the one-time amnesty (if all rest homes newly eligible continue to comply with the weekly surveillance testing and reporting requirements), and a one-time amount of \$50,457 if all rest homes provide vaccine administration to all residents. But this amount may vary if certain rest homes do not provide vaccine administration or administer additional doses. Approximately \$907,257 in fiscal impact is to be realized in FY2022 (inclusive of the aforementioned assumptions). This concludes my testimony. Thank you.